


Please type a plus sign (+) inside this box 

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/993,888
Filing Date	November 27, 2001
First Named Inventor	Mark E. Pennell
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000110

**COPY OF PAPERS  
ORIGINALLY FILED**

I hereby appoint:

☐ Practitioners at Customer Number   
OR

Place Customer  
Number Bar Code  
Label here

☒ Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.  
OR

☐ Practitioners at Customer Number   
OR

Place Customer  
Number Bar Code  
Label here

<input checked="" type="checkbox"/> Firm or Individual Name	DEGUZMAN OKAMOTO & BENEDICTO, LLP				
Address	P.O. Box 51900				
Address					
City	Palo Alto	State	CA	ZIP	94303
Country	U.S.A.				
Telephone	650-691-4761	Fax	650-691-2032		

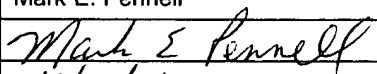
I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

## SIGNATURE of Applicant or Assignee of Record

Name	Mark E. Pennell
Signature	
Date	12/30/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box



PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	09/993,888
Filing Date	November 27, 2001
First Named Inventor	Mark E. Pennell
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000110

**COPY OF PAPERS  
ORIGINALLY FILED**

I hereby appoint:

☐ Practitioners at Customer Number   
OR

Place Customer  
Number Bar Code  
Label here

☒ Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.  
OR

☐ Practitioners at Customer Number   
OR

Place Customer  
Number Bar Code  
Label here

☒ Firm or Individual Name  
DEGUZMAN OKAMOTO & BENEDICTO, LLP

Address  
P.O. Box 51900

Address

City  
Palo Alto

State

CA

ZIP

94303

Country  
U.S.A.

Telephone  
650-691-4761

Fax

650-691-2032

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

**SIGNATURE of Applicant or Assignee of Record**

Name  
L. Scott Primak

Signature


Date

12/17/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box 

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/993,888
Filing Date	November 27, 2001
First Named Inventor	Mark E. Pennell
Group Art Unit	2152
Examiner Name	not yet known
Attorney Docket Number	10005.000110

I hereby appoint:

☐ Practitioners at Customer Number 

OR

☒ Practitioner(s) named below:

Place Customer  
Number Bar Code  
Label here

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number 

OR

Place Customer  
Number Bar Code  
Label here

☒ Firm or  
Individual Name

DEGUZMAN OKAMOTO & BENEDICTO, LLP

Address

P.O. Box 51900

Address

City

Palo Alto

State

CA

ZIP

94303

Country

U.S.A.

Telephone

650-691-4761

Fax

650-691-2032

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

## SIGNATURE of Applicant or Assignee of Record

Name

Charles Gilbert

Signature



Date

12-17-01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.